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**Before the House Committee on Government Reform
Subcommittee on Criminal Justice, Drug Policy, and Human Resources
Chairman Mark E. Souder, 109th Congress**

**“Reauthorization of the Office of National Drug Control Policy”
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Chairman Souder, Ranking Member Cummings, and distinguished Members of the Subcommittee: Thank you for inviting me to testify on H.R. 2829, the Office of National Drug Control Policy Reauthorization Act of 2005. I appreciate the opportunity to discuss the progress the Administration has made with the support of Congress in reducing drug use. Together, we have reduced youth drug use by 17 percent since 2001.¹

The Office of National Drug Control Policy (ONDCP) was established by the Anti-Drug Abuse Act of 1988. The principal purpose of ONDCP is to establish policies, priorities, and objectives for the Nation's drug control program. The goals of the program are to reduce illicit drug use, manufacturing and trafficking, drug-related crime and violence, and drug-related health consequences. To achieve these goals, the Director of ONDCP is charged with producing the National Drug Control Strategy. The Strategy directs the Nation's anti-drug efforts and establishes a program, a budget, and guidelines for cooperation among Federal, State, and local entities.

By law, the Director of ONDCP also evaluates, coordinates, and oversees both the international and domestic anti-drug efforts of executive branch agencies and ensures that such efforts sustain and complement State and local anti-drug activities. The Director advises the President regarding changes in the organization, management, budgeting, and personnel of Federal Agencies that could affect the Nation's anti-drug efforts; and regarding Federal agency compliance with their obligations under the Strategy.

The authority under which ONDCP currently operates not only meets the drug threat, but is making a fundamental difference in combating the illicit drug market.

National Drug Control Strategy

In 2002, President Bush set ambitious goals to reduce teen drug use by 10 percent in two years, and by 25 percent in five years. The Administration has exceeded the two-year goal, with an 11 percent reduction, and over the past three years there has been an historic 17 percent decrease in teenage drug use. Pursuing a strategy focusing on prevention and treatment, as well as law enforcement and international programs, there are now 600,000 fewer teens using drugs than there were in 2001. This is real progress, and the 2005 Strategy builds on this dramatic success.

¹ Monitoring the Future (2004)

We have achieved the important goal of getting drug use by our young people moving downward. We now must secure the equally important objective of sustaining, accelerating, and broadening that downward movement. Maintaining our momentum will require a sustained focus on all aspects of drug control, as well as a balanced strategy for approaching the problem. With its three priorities and clarity of purpose, the Strategy offers both.

I. Stopping Use Before It Starts: Education and Community Action

Progress in the fight against drugs is to be found in our schools, our neighborhoods, and our workplaces. Attitudes against drug use continue to harden. The number of children using drugs continues to fall. Citizens all across the country are uniting in community coalitions to battle vigorously against drug use and drug dealing in their neighborhoods. Though youth drug use is continuing to decline, the number of drug users overall is still far too high, and young people remain susceptible to the lure of drugs. This is our continuing challenge that the Strategy addresses through a combination of innovative programs aimed at our youth and their parents, who consistently are the most influential force in the lives of their children.

II. Healing America's Drug Users: Getting Treatment Resources Where They Are Needed

As risky behavior goes, drug use ranks among the worst. While it is difficult to draw precise inferences from the data available, the likelihood that an adult who uses drugs at least on a monthly basis (a so-called "current" user) will go on to need drug treatment is approximately one in four—high enough to constitute a substantial risk, which draws millions of people to self-destruction, but low enough that many individuals are able to deny the obvious risks or convince themselves that they can "manage" their drug using behavior.

To assist those who would benefit from drug treatment, the Strategy focuses on innovative Department of Health and Human Services grants such as Access to Recovery, as well as interventions through the criminal justice system. In addition to these avenues, the Strategy supports approaches in a variety of settings to encourage drug users to seek the treatment they need. These include hospital emergency rooms, where doctors are now screening individuals for evidence of drug dependence and referring them to treatment as needed. They also include nonprofit organizations serving the needs of formerly addicted prisoners reentering society. These groups support their clients' first tentative steps in freedom, steering them away from established patterns of crime and drug use and into recovery after what for too many has been a life of addiction.

III. Disrupting the Market: Attacking the Economic Basis of the Drug Trade

The strategy of the U.S. Government is to disrupt the market for illegal drugs—to do so in a way that both reduces the profitability of the drug trade and increases the costs of drugs to consumers. In other words, we seek to inflict on this business what every licit business fears—escalating costs, diminishing profits, and unreliable suppliers.

To effectively disrupt major drug markets, it is important that U.S. law enforcement and our allies approach this problem strategically, as a market. Many drug trafficking organizations are complex, far-flung international businesses, often compared to multinational corporations. Still other successful international trafficking organizations function as *networks*, with business functions accomplished by loosely aligned associations of independent producers, shippers, distributors, processors, marketers, financiers, and wholesalers. Such networked organizations pose special challenges to law enforcement and interdiction forces, since by the very nature of a network, the system is resistant to the disruption or dismantling of individual elements. As the Strategy demonstrates, networked organizations are not immune from severe disruption and dismantlement. The way to severely damage a networked organization is repeatedly to damage or destroy most of the elements in one horizontal layer of the network—especially a layer requiring critical contacts or skills—at a rate higher than the organization’s ability to replace them.

The Strategy describes how the United States Government, in concert with international allies, is seeking to target networks by attacking entire business sectors, such as the transporter sector. The Strategy lays out several examples, including destroying the economic basis of the cocaine production business in South America by fumigating the coca crop; seizing enormous and unsustainable amounts of cocaine from transporters; and selectively targeting major organization heads for law enforcement action and, ultimately, extradition and prosecution in the United States.

Concerns with the Office of National Drug Control Policy Reauthorization Act of 2005

I. Development and Oversight of the National Drug Control Budget

ONDCP formulates the National Drug Control Budget through the authorities provided by Congress. ONDCP authority to assist in coordinating the President’s drug control programs includes the important ability to review agency budgets. This is a two-tiered process, consisting of a summer review of bureau-level submissions and a fall review and certification of agency submissions. For each of these stages of review, budgets are judged based on funding guidance I am required by law to provide to the Cabinet in the spring. My evaluation of these proposals is also closely tied to demonstrated results from these drug programs. ONDCP’s budget review and certification process is an instrument in focusing resources toward critical initiatives that support the Strategy. Section 5(e) of the reauthorization bill would overly restrict my discretion in this process by prohibiting me from certifying a budget request that does not meet specific criteria established by the bill.

Since ONDCP was last authorized, there has been one very significant change to the drug budget process that has significantly enhanced ONDCP’s ability to provide effective oversight of drug control programs—a restructured presentation and accounting of the drug budget. This proposal was initially communicated to Congress in the February 2002 Strategy documents. It was fully implemented in the fiscal year 2004 Budget of the President, transmitted to the Congress the following year.

Prior to this change in the budget, the drug control program consisted of close to 50 budget accounts totaling \$19 billion. Independent analyses of these budgets commissioned by ONDCP², as well as required reviews by department Inspectors General³ identified significant weaknesses in these budget presentations. Many of these issues were associated with the drug budget methodologies used by agencies to estimate drug spending. Drug budget methodologies were imprecise and often had only a weak association with core drug control missions. The revised budget presentation provides a greater degree of accountability for federal drug control programs.

The basic shortcoming associated with the old drug budget was that much of the funding displayed did not represent real dollars in the President's Budget. Drug budget calculations were not transparent to the public, Executive Department officials, or Congress. The drug budget generally did not represent funds that could be readily found in individual agency budget documents or accounting systems. Since the drug budget was a collection of estimates based on percentages of many accounts, it was wholly an artificial construction.

To correct this fundamental deficiency, the revised drug budget was restructured to display, to the extent possible, actual funds found in the President's Budget. If possible, all drug control funding would be directly appropriated by Congress into separately identified accounts reflected throughout the Federal Budget. Even though the revised budget still includes funding for some agencies (i.e., Homeland Security and Veterans Affairs) that is based on complex methodologies and calculations, the proportions of those budgets that actually goes to drug-related activities are substantial and measurable, whereas in the accounts that we no longer score, the drug-related activities are ancillary to the central mission of the agencies and difficult to identify or score due to their small scale. In whole, the new budget structure is a vast improvement over the old accounting system.

Section 5(c) of the reauthorization bill would have the overall effect of returning ONDCP to the drug budget scorekeeping methodology of the past. We oppose these changes for the reasons discussed above.

II. National Youth Anti-Drug Media Campaign

The National Youth Anti-Drug Media Campaign (NYADMC) leads our efforts to reduce youth drug use. The NYADMC is an integrated effort that combines advertising with public communications outreach. It has developed a series of advertisements that change youth attitudes of drug use and coach parents in monitoring teen behavior and promoting early intervention against signs of early drug use. The President's fiscal year 2006 budget proposes \$120 million for the NYADMC.

² Patrick Murphy, Lynn E. Davis, Timothy Liston, David Thaler, and Kathi Webb, *Improving Anti-Drug Budgeting* (Santa Monica, CA: RAND, 2000).

³ Office of National Drug Control Policy (ONDCP), *FY 1999 Accounting of Drug Control Funds* (Washington, DC: ONDCP, 2000). ONDCP, *FY 2000 Accounting of Drug Control Funds* (Washington, DC: ONDCP, 2001). These documents included reports from department Inspectors General regarding agency drug budget presentations. Both the FY 1999 and FY 2000 Accounting Reports were transmitted by ONDCP to the Congress, pursuant to 21 U.S.C. § 1704(d).

We are convinced that the NYADMC has been a major contributor to our success. Exposure to anti-drug advertising has had an impact on improving youth anti-drug attitudes and beliefs since 2002. Among all three grades surveyed by the Monitoring the Future (MTF) study supported by the National Institute on Drug Abuse in the Department of Health and Human Services (DHHS) over the course of the NYADMC, such ads have made youth to a “great extent” or “very great extent” less favorable toward drugs and less likely to use them in the future. Further, more than half of the increase in most of these outcomes among all three grades has occurred in the past three years. This is particularly striking among 10th graders, our primary target audience. With these results, the NYADMC will continue as our primary drug prevention program, and I look forward to additional progress in the future.

However, Section 11(b)(3) of the reauthorization bill is problematic in continuing the success of the NYADMC. ONDCP needs to be able to determine from time to time what level of expenditures for advertising will achieve the optimal reach and frequency to meet the goals of the Media Campaign without the imposition of a minimum amount for advertising. Especially troublesome is the requirement that not less than 82 percent of the amounts appropriated under this section be used for advertising time and space in years when the appropriation is less than \$125 million. Under this requirement, the NYADMC would be required to spend substantially more on time and space than originally envisioned and justified. This requirement would have the effect of limiting production of an adequate number of ads for the Campaign’s two key target audiences – youth and parents. The end result would be fewer quality ads available which would then be worn out sooner, thus boring or possibly even alienating our audiences, especially the highly-sensitive teen audience.

Additionally, the requirement to spend 82 percent of the NYADMC budget on advertising time and space would compromise the Campaign’s ability to reach ethnic populations, including African American, Hispanic, Asian-American and American Indian. Many of the special outreach efforts to ethnic groups through the news media, the Internet (in language), and by involving key Campaign partners would no longer be possible, thus shrinking our ability to deliver culturally relevant, effective messaging to these important groups.

Finally, a requirement to spend 82 percent of the total NYADMC budget on advertising time and space would compromise the Campaign’s ability to create, maintain, and update websites. Without quality content and new, fresh looks and ideas, the usage rates will decrease and we will not reach nearly as many audience members. Indeed, internet users would likely see the banner ads, but they will be repetitive, worn out, and possibly scientifically out of date. Examples of websites this would impact include www.theantidrug.com (for parents) and www.freevibe.com (for teenagers).

III. United States Interdiction Coordinator

The United States Interdiction Coordinator (USIC) was established by Executive Order 12880 (1993) with the responsibility to ensure that assets dedicated by Federal drug program agencies for interdiction are sufficient and that their use is properly integrated and optimized. Additionally, the USIC is to ensure that interdiction efforts and priorities are consistent with overall U.S. international counternarcotics policy. The authority and responsibility of the USIC

was interpreted and codified by Congress in the Homeland Security Act of 2002. The authority and responsibility of the USIC was then altered in the National Intelligence Reform Act of 2004. The Office of National Drug Control Policy Reauthorization Act of 2005 seeks to change the authority and responsibility of the USIC once again.

Unfortunately, some of the proposed changes in Section 12 of the reauthorization bill are contrary to the authority and responsibility of the USIC. The USIC, under the direction of the Director of National Drug Control Policy, is responsible for:

- (1) ensuring that the operational priorities of the United States to interdict the flow of illicit drugs are consistent with the President's National Drug Control Strategy, and supporting national policy directives,
- (2) assessing the sufficiency of assets committed to illicit drug interdiction by Federal drug program agencies and ensuring that their use, location, and scheduling are properly integrated and optimized,
- (3) reporting unresolved issues to the Director for resolution among principals,
- (4) reporting as the Director, National Drug Control Policy may direct concerning the adequacy, integration and utilization of interdiction assets; improvements in interdiction command, control, communications and intelligence systems; and other matters that may bear on the accomplishment of interdiction objectives; and
- (5) such other duties as determined by the Director, National Drug Control Policy.

The USIC is an advisor to the Director of National Drug Control Policy and prescribing the role of the USIC in Section 12 of the reauthorization bill is unnecessarily limiting.

Conclusion

The Office of National Drug Control Policy Reauthorization Act of 2005 is a step towards reducing drug use in America. Although I have concerns with provisions in the bill, they are primarily due to the bill being prescriptive rather than opting for flexibility in a time where rapid change to meet the threats of today can make a fundamental difference in the way the illicit drug market operates. Additionally, there are portions of the bill that usurp Executive Branch privilege, including Section 4(b) which determines the rank of the Director, Section 4(c)(2) which would limit the President's ability to nominate the most qualified person to be Deputy Director for Supply Reduction, Section 4(g)(4) which requires a parallel drug country certification process using a different standard than the President is required to apply in the existing process, and Section 8(i) which stipulates how the President's budget is to be submitted with regard to the High Intensity Drug Trafficking Program which is not within ONDCP in the President's fiscal year 2006 budget submission. The Administration strongly opposes any provisions in the bill that limit the Executive Branch's or the President's prerogatives.

In a time when our prevention efforts have been more effective than they have ever been, in a time when we are closing the treatment gap in America, and in a time when we are significantly reducing the supply of drugs while shutting down the trafficking organizations, we need to follow-through. Last year, approximately 26,000 Americans died due to drugs—we save them by continuing on the path that has realized a 17 percent reduction in youth drug use.